

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00053553	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Tactical Guns &amp; Gear, LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 29 / 2014</b>	
Mailing Address <b>4400 Kiln Court</b>		Amount <b>200.00</b>	
City <b>Louisville</b>	State <b>KY</b>	Zip Code <b>40218</b>	Transaction ID : <b>62374142</b>
Purpose of Expenditure <b>Booth Rental</b>	Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate <b>Sen. Mitch McConnell</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <b>KY</b> <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought <b>0.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Prolist Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 29 / 2014</b>	
Mailing Address <b>8341 Beechcraft Avenue</b>		Amount <b>13684.33</b>	
City <b>Gaithersburg</b>	State <b>MD</b>	Zip Code <b>20879-1509</b>	Transaction ID : <b>62716539</b>
Purpose of Expenditure <b>Postage</b>	Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate <b>William Southerland II</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>02</b> <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought <b>0.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>13884.33</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 30 / 2014**

Signature